

**LEGISLATIVE SERVICES AGENCY  
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**FISCAL IMPACT STATEMENT**

**LS 6142**

**BILL NUMBER:** SB 64

**NOTE PREPARED:** Nov 8, 2002

**BILL AMENDED:**

**SUBJECT:** Psychiatric Advance Directives.

**FIRST AUTHOR:** Sen. Lawson C

**FIRST SPONSOR:**

**BILL STATUS:** As Introduced

**FUNDS AFFECTED:**     **GENERAL  
DEDICATED  
FEDERAL**

**IMPACT:** No Fiscal Impact

**Summary of Legislation:** This bill authorizes the execution of a psychiatric advance directive (a medical directive that directs the administration of or refuses psychiatric restabilization for the care and treatment of an individual's mental illness).

The bill requires a psychiatrist, a health care provider, emergency medical service personnel, or a health care facility to comply with a psychiatric advance directive. The bill provides that a person is not subject to civil or criminal liability for complying in good faith with a psychiatric advance directive. (The introduced version of this bill was prepared by the Commission on Mental Health.)

**Effective Date:** July 1, 2003.

**Explanation of State Expenditures:** This bill requires that the Family and Social Services Administration (FSSA) set forth forms for the execution of a psychiatric advance directive, protocols for the identification of an individual who has executed a psychiatric advance directive, and methods to protect the confidentiality of an individual who has executed a psychiatric advance directive. FSSA reports that the agency can absorb these administrative costs given their current staffing and budget and that the bill, generally, will not have a fiscal impact on their agency.

It is important to note that if the care is not appropriate at the time, based upon the attending psychiatrist judgement, an individual with a PAD may not receive the specified care. In addition, it is unclear as to whether a PAD can prevent an individual from refusing treatment as is currently the case with regular advance directives. Given these factors, it is anticipated that this bill will not have a fiscal impact on state expenditures for mental health services.

*Background:* There are currently 14 states that have psychiatric advance directive laws. Psychiatric advance directives are relatively new and there is very little case law regarding their use. A psychiatric advance directive allows a person to direct the type of treatment they receive if they become mentally unstable, treatment facility, and whether or not they want to receive treatment at all. Court orders and physician directives may supersede a psychiatric advance directive.

**Explanation of State Revenues:**

**Explanation of Local Expenditures:**

**Explanation of Local Revenues:**

**State Agencies Affected:** Family and Social Services Administration.

**Local Agencies Affected:**

**Information Sources:** Susan Kilty, Family and Social Services Administration, 317-232-4451.

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